Understanding Socioeconomic Characteristics of Kidney Sellers in Pakistan

This exploratory multiple Case study identified the channel that a seller goes through to sell his kidney and identified economic, health, social and psychological post nephrectomy effects that a kidney seller faces. The data was collected using in depth interviews from 16 male and female kidney sellers. Data was analyzed using cross case analysis that congregated axial codes according to themes, in relation to study objectives.

Kidney sellers are all Muslim Sheikh and uneducated. The study identified the channel that a seller goes through to sell the kidney and it analyzed the social, economic, health and psychological post-operative effects of selling a kidney. Technological driven demand of human organs created a black market, where the supplier are asset less poor who are lured by lucrative offers. Respondents sold kidneys through a middleman and direct to clinics and the presence or absence of a middleman did not appear to be affecting the amount received against kidney. Inefficiency of the THOTO (2007) is evident from the emerging themes that kidney-selling process continued to work without any change in the channel. Economic status and health of the respondents is deteriorating over the time. Kidney selling is a social stigma in Pakistani society, so respondents had to face severe criticism from the family and community. The respondents were also facing psychological affects like fear and depression. Current study suggests that all the sellers are asset less and thus they had to make decision of selling their kidneys. All the respondents are facing deteriorating living standards. The situation of transplant tourism in Pakistan is worse and THOTO had proved to be ineffective.

Such situation depicts the social and moral degradation of the society, and explains situation of social injustice and bio violence. It provides an answer to Western proponents of establishment of market and their claims that legalized selling will benefit the seller. Actually, it will result in medical apartheid. It also urges the medical specialist and market proponents to understand substantial cultural resistance against such notions, and understand importance of local concepts of personhood and body integrity.